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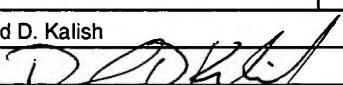
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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR § 1.53(b))</small>		Attorney Docket No. 4670-237/2003-0365.02
		First Inventor or Application Identifier Delbert Lester Elliott
Title	Meth d and D vice t Control th Alignm nt f a M dia Sheet in an Imag Forming Device	
		Express Mail Label No. EV 368751669US

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		Mail Stop Patent Application ADDRESS TO: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
<p>1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 17] (preferred arrangement set forth below)</p> <ul style="list-style-type: none"> — Descriptive title to the Invention — Cross References to Related Applications — Statement Regarding Fed sponsored R & D — Reference to Microfiche Appendix — Background of the Invention — Brief Summary of the Invention — Brief Description of the Drawings (if filed) — Detailed Description — Claim(s) — Abstract of the Disclosure <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 4]</p> <p>4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 4]</p> <p>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]</p> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</p> <p>5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p> <p>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Copy</p> <p>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</p> <p>c. <input type="checkbox"/> Statement verifying identity of above copies</p>		
ACCOMPANYING APPLICATION PARTS		
<p>8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>9. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>10. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>14. <input type="checkbox"/> *Small Entity <input type="checkbox"/> Statement filed in prior application, Statement(s) Status still proper and desired</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input checked="" type="checkbox"/> Other: <u>Express Mail Certification</u></p>		
*NOTE FOR ITEMS 1 & 14: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).		

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary statement:					
<input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____ / _____ Prior application information: Examiner: _____ Group/Art Unit: _____					

18. CORRESPONDENCE ADDRESS					
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<input type="checkbox"/> Customer Number		or <input checked="" type="checkbox"/> Correspondence address below			
NAME		LEXMARK INTERNATIONAL, INC. ATT: JOHN J. McARDLE, JR.			
ADDRESS		740 WEST NEW CIRCLE ROAD			
CITY	LEXINGTON	STATE	KY	ZIP CODE	40550
COUNTRY	USA	TELEPHONE	859-232-3939	FAX	
Name (Print/Type)	David D. Kalish		Registration No. (Attorney/Agent)		42,706
Signature				Date	January 29, 2004

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

U.S.PTO
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1608
0729047**FEE TRANSMITTAL**

Patent fees are subject to annual revision on October 1

These are the fees effective December 29, 1999.

Small Entity payments must be supported by a small entity statement.

otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$1,068.00)

Complete if Known

Application Number	TBA
Filing Date	
First Named Inventor	Delbert Lester Elliott
Examiner Name	TBA
Group Art Unit	TBA
Attorney Docket No.	4670-237/2003-0365.02

METHOD OF PAYMENT (check one)				FEE CALCULATION (continued)				
1. <input checked="" type="checkbox"/> The Commission is hereby authorized to charge indicated fees and credit any over payments to:				3. ADDITIONAL FEES Large Entity Fee (\$) Small Entity Fee (\$) Fee Description : Paid				
Deposit Account Number	18-1167			105	130	205	65	Surcharge - late filing fee or oath
Deposit Account Name	Coats & Bennett, P.L.L.C.			127	50	227	25	Surcharge - late provisional filing fee or cover sheet
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR §1.18 at the Mailing of the Notice of Allowance				139	130	139	130	Non-English specification
2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other				147	2,520	147	2,520	For filing a request for reexamination
				112	920*	112	920*	Requesting publication of SIR prior to Examiner action
				113	1,840*	113	1,840*	Requesting publication of SIR after Examination action
				115	110	215	55	Extension for reply within first month
				116	380	216	190	Extension for reply within second month
				117	870	217	435	Extension for reply within third month
				118	1,360	218	680	Extension for reply within fourth month
				128	1,850	228	925	Extension for reply within fifth month
				119	300	219	150	Notice of Appeal
				120	300	220	150	Filing a brief in support of an appeal
				121	260	221	130	Request for oral hearing
				138	1,510	138	1,510	Petition to institute a public use proceeding
				140	110	240	55	Petition to revive - unavoidable
				141	1,210	241	605	Petition to revive - unintentional
				142	1,210	242	605	Utility issue fee (or reissue)
				143	430	243	215	Design issue fee
				144	580	244	290	Plant issue fee
				122	130	122	130	Petitions to the Commissioner
				123	50	123	50	Petitions related to provisional applications
				126	240	126	240	Submission of Information Disclosure Stmt.
Total Claims	20	-20** =	0	X	18.00	=	0.00	
Independent Claims	6	-3** =	3	X	86.00	=	258.00	
Multiple Dependent Claims				X		=		
** or number previously paid, if greater; For Reissues, see below								
Large Entity Fee (\$)	Fee Code (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid				
103	18	203	9	770.00				
102	78	202	39					
104	260	204	130					
109	78	209	39					
110	18	210	9					
SUBTOTAL (1) (\$770.00)								
2. EXTRA CLAIM FEES								
				Extra Claims	Fee from below	Fee Paid		
Total Claims	20	-20** =	0	X	18.00	=	0.00	
Independent Claims	6	-3** =	3	X	86.00	=	258.00	
Multiple Dependent Claims				X		=		
** or number previously paid, if greater; For Reissues, see below								
Large Entity Fee (\$)	Fee Code (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid				
103	18	203	9	Claims in excess of 20				
102	78	202	39	Independent claims in excess of 3				
104	260	204	130	Multiple dependent claim				
109	78	209	39	**Reissue independent claims over original patent				
110	18	210	9	**Reissue claims in excess of 20 and over original patent				
SUBTOTAL (2) (\$258.00)								
				Other fee (specify)				
				Other fee (specify)				
				*Reduced by Basic Filing Fee Paid				
								SUBTOTAL (3) (\$40.00)

SUBMITTED BY				Complete (if applicable)	
Typed or Printed Name	David D. Kalish			Reg. Number	42,706
Signature				Date	January 29, 2004
				Deposit Account User ID	18-1167

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
Elli tt, t al.)
Serial No.:)
Filed:)
Title: **METHOD AND DEVICE TO CONTROL**)
THE ALIGNMENT OF A MEDIA SHEET IN AN)
IMAGE FORMING DEVICE)
Attorney's Docket No: 4670-237/2003-0365.02)

EXPRESS MAIL CERTIFICATION
LABEL NO.: EV 368751669 US

Raleigh, North Carolina
January 29, 2004

MAIL STOP PATENT APPLICATION
COMMISSIONER FOR PATENTS
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

Sir:

EXPRESS MAIL CERTIFICATE LABEL NO.: EV 368751669 US

DATE MAILED: January 29, 2004

I hereby certify that the enclosed US Utility Patent Application Transmittal Form, Fee Transmittal Form (2 Copies), specification and claims, drawings (1 set of 4 sheets), Declaration and Power of Attorney, Assignment and Recordation Sheet, Information Disclosure Statement, and our check number 11080 in the amount of \$1,068.00 are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above and is addressed to: **Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

Respectfully submitted,

COATS & BENNETT, P.L.L.C.

By:



David D. Kalish
Registration No. 42,706

Telephone: (919) 854-1844